

This portion MUST be returned with your payment to ensure proper credit. THANK YOU

| |
|-----------------------|
| ACCOUNT BILLED |
| DEVAR SHUMWAY & SONS |

| |
|----------------------|
| PROPERTY NAME |
| BROWN CLAIMS |

| |
|--------------------|
| PROPERTY ID |
| S370089 |

| |
|---------------------|
| BILLING DATE |
| 6/26/1998 |

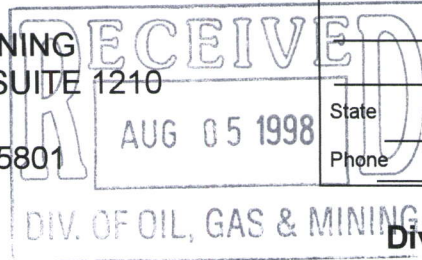
| |
|-------------------|
| AMOUNT DUE |
| \$ 100.00 |

| |
|--------------------|
| AMOUNT PAID |
| \$ 100.00 |

| |
|--|
| <input type="checkbox"/> FEE NOT ENCLOSED |
| Permittee requests an inspection to close out this permit. |

*HA
2/5/98*

DIVISION OF OIL GAS AND MINING
1594 WEST NORTH TEMPLE SUITE 1210
PO BOX 145801
SALT LAKE CITY UT 84114-5801



| | |
|--------------------------|-------------------------|
| Change of Address | |
| Contact | _____ |
| Address | _____ _____ _____ |
| State | _____ Zip _____ |
| Phone | _____ |

Please make check payable to:
Division of Oil, Gas and Mining